

Application for Employment

VA BOYS LEADERSHIP ALLIANCE
331 Big Bethel Road
Hampton, VA 23666



| APPLICANT INFORMATION | | | | DATE AVAILABLE: _____ | | | |
|--|----|---------------------------|-------|------------------------------|-----------------------------------|-------|--|
| Name: Last | | First | | Middle | | Date: | |
| Street Address | | | | | Apartment/Unit # | | |
| City | | | State | | Zip Code | | |
| Home Phone: | | Mobile or Business Phone: | | E-mail Address: | | | |
| Date of birth: | | Social Security #: | | | Desired Salary \$ _____ Per _____ | | |
| Position for which you are applying: | | | | | | | |
| Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO | | | | | | | |
| Are you 18 years or older? YES NO If no, please state your age: | | | | | | | |
| Have you ever been convicted of a felony, barrier crime or subject of a founded Child Protective Service complaint? | | | | | | | |
| Yes No If yes, please explain: | | | | | | | |
| Employment Requires Criminal Background Clearances. Is this acceptable to you? Yes No | | | | | | | |
| EMERGENCY | | | | | | | |
| <i>In case of an emergency, please notify:</i> | | | | | | | |
| Name: | | | | | Relationship: | | |
| Street Address: | | | | | Phone: | | |
| City: | | State: | | Zip Code: | | | |
| EDUCATION | | | | | | | |
| High School | | | | Address | | | |
| From | To | Did you graduate? | YES | NO | Date of Graduation or GED: | | |
| College | | | | Address | | | |
| From | To | Did you graduate? | YES | NO | Degree | | |
| Other | | | | Address | | | |
| From | To | Did you graduate? | YES | NO | Degree | | |
| Additional training or certification that would be helpful in evaluating your application: | | | | | | | |
| _____ | | | | | | | |
| _____ | | | | | | | |
| Do you have any medical condition(s) which may interfere with fulfilling the responsibility of the position for which you are applying? Yes No If so, please explain: _____ | | | | | | | |

Application for Employment (please print in ink)

EXPERIENCE

Begin with the current or most recent employment (including military experience). Please attach your resume. Use additional paper if necessary.

| | | | |
|--|-----------------|--------------------|------------------|
| Company | | Phone | |
| Address | | Supervisor | |
| Job Title | Starting Salary | \$ | Ending Salary \$ |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? | | YES | NO |
| Company | | Phone | |
| Address | | Supervisor | |
| Job Title | Starting Salary | \$ | Ending Salary \$ |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? | | YES | NO |
| Company | | Phone | |
| Address | | Supervisor | |
| Job Title | Starting Salary | \$ | Ending Salary \$ |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? | | YES | NO |

REFERENCES

Please list one (1) professional and two (2) personal references.

| | | | |
|-----------|---------------|--------|-----------|
| Full Name | Relationship: | | |
| Company | Phone: | | |
| Address: | City: | State: | Zip Code: |
| Full Name | Relationship: | | |
| Company | Phone: | | |
| Address: | City: | State: | Zip Code: |
| Full Name | Relationship: | | |
| Company | Phone: | | |
| Address: | City: | State: | Zip Code: |

Application for Employment (please print in ink)

Additional Information

Who referred you to VA BLA? _____

What are your best qualities: _____

List activities and other special achievements which you feel will be of importance in you work: _____

List organizations with which you are or have been associated with (church, social, community, school, professional, trade, etc.): _____

DISCLOSURE

Do you possess a valid driver's license? Yes No IF YES: State: _____ License # _____

Before driving a vehicle to transport children, I realize that I am required to disclose any moving traffic violations that occurred five years prior to or during employment or assignment as a driver.

Signature: _____

Date: _____

DISCLAIMER AND SIGNATURE

- I understand that I will be required to submit written information to demonstrate that I possess the education, orientation training, staff development, certification, and experiences required by the job position.
- I hereby certify that my answers are true and complete to the best of my knowledge.
- If this application leads to employment, I understand that false or misleading information in my application or interview may result in my immediate release.

Print Name: _____

Signature: _____

Date: _____

*Please be prepared to submit a professional reference letter upon request

*For Office Use Only

Position Applied for: _____

Interview Date: _____

Date of Hire: _____

Site Location: _____

Date of Separation: _____